

Chapter 246-933 WAC
VETERINARIANS—VETERINARY BOARD

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WAC

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246-933-170 Cooperation with the board. [Statutory Authority: RCW 18.92.030. WSR 92-17-076 (Order 299B), § 246-933-170, filed 8/19/92, effective 9/19/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-170, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-070, filed 7/23/80.] Repealed by WSR 97-20-101, filed 9/29/97, effective 10/30/97. Statutory Authority: RCW 43.70.040.

246-933-180 Responsibility for maintaining mailing address on file with the board. [Statutory Authority: RCW 18.92.030. WSR 93-08-029 (Order 353B), § 246-933-180, filed 3/30/93, effective 4/30/93.] Repealed by WSR 98-05-060, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.280.

246-933-230 Foreign trained veterinarians. [Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-230, filed 12/28/90, effective 1/31/91; Order PL 232, § 308-151-060, filed 11/17/75.] Repealed by WSR 07-20-036, filed 9/25/07, effective 10/26/07. Statutory Authority: RCW 18.92.030.

246-933-240 Practical examination requirement. [Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-240, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-240, filed 12/28/90, effective 1/31/91; WSR 79-10-087 (Order 318), § 308-151-070, filed 9/21/79.] Repealed by WSR 92-17-076 (Order 299B), filed 8/19/92, effective 9/19/92. Statutory Authority: RCW 18.92.030.

246-933-260 Frequency and location of examinations. [Statutory Authority: RCW 18.92.030. WSR 01-02-066, § 246-933-260, filed 12/29/00, effective 1/29/01; WSR 91-24-098 (Order 221B), § 246-933-260, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-260, filed 12/28/90, effective 1/31/91; WSR 88-08-033 (Order PM 719), § 308-151-090, filed 4/1/88; WSR 80-05-032 (Order 340), § 308-151-090, filed 4/15/80.] Repealed by WSR 07-20-036, filed 9/25/07, effective 10/26/07. Statutory Authority: RCW 18.92.030.

246-933-280 Examination review procedures. [Statutory Authority: RCW 18.92.030. WSR 92-03-074 (Order 235B), § 246-933-280, filed 1/14/92, effective 2/14/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-280, filed 12/28/90, effective 1/31/91; WSR 86-08-068 (Order PL 584), § 308-151-110, filed 4/1/86.] Repealed by WSR 07-20-036, filed 9/25/07, effective 10/26/07. Statutory Authority: RCW 18.92.030.

246-933-285 HIV/AIDS prevention and information education requirements. [Statutory Authority: RCW 18.92.030. WSR 19-02-033, § 246-933-285, filed 12/21/18, effective 1/21/19.] Repealed by WSR 22-11-062, filed 5/16/22, effective 6/16/22. Statutory Authority: RCW 18.92.030, 18.92.280, and 2020 cc 229 and 76.

246-933-430 Effective date of requirement. [Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-430, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-430, filed 12/28/90, effective 1/31/91; Order 233, § 308-154-030, filed 2/16/77.] Repealed by WSR 98-05-060, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.280.

246-933-450 Qualification of program for continuing education credit. [Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-450, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-450, filed 12/28/90, effective 1/31/91; Order 233, § 308-154-050, filed 2/16/77.] Repealed by WSR 07-19-130, filed 9/19/07, effective 10/20/07. Statutory Authority: RCW 18.92.030.

246-933-465 Self-study continuing veterinary medical education activities. [Statutory Authority: RCW 18.92.030. WSR 07-19-130, § 246-933-465, filed 9/19/07, effective 10/20/07.] Repealed by WSR 19-02-033, filed 12/21/18, effective 1/21/19. Statutory Authority: RCW 18.92.030.

246-933-470 Continuing education—Certification of compliance. [Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-470, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-470, filed 12/28/90, effective 1/31/91; WSR 80-16-023 (Order PL 358), § 308-154-080, filed 10/29/80.] Repealed by WSR 98-05-060, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.280.

246-933-480 AIDS prevention and information education requirements. [Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-933-480, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.92.030 and 70.24.270. WSR 91-24-098 (Order 221B), § 246-933-480, filed 12/4/91, effective 1/4/92. Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-480, filed 12/28/90, effective 1/31/91. Statutory Authority: 1988 c 206 § 604 and RCW 18.92.030. WSR 89-10-076 (Order PM 836), § 308-154-085, filed 5/3/89.] Repealed by WSR 19-02-033, filed 12/21/18, effective 1/21/19. Statutory Authority: RCW 18.92.030.

246-933-550 Investigation. [Statutory Authority: RCW 18.92.030(2). WSR 14-13-016, § 246-933-550, filed 6/6/14, effective 7/7/14. Statutory Authority: RCW 18.92.030 and 18.92.260. WSR 03-14-035, § 246-933-550, filed 6/23/03, effective 7/24/03.] Repealed by WSR 23-11-002, filed 5/3/23, effective 6/3/23. Statutory Authority: RCW 18.92.030, 18.92.250, 18.92.260, and 2019 c 142.

246-933-980 Licensing/renewal/late penalty. [Statutory Authority: RCW 18.92.030. WSR 93-08-029 (Order 353B), § 246-933-980, filed 3/30/93, effective 4/30/93. Statutory Authority: RCW 43.70.040 and 18.92.140. WSR 92-07-036 (Order 252), § 246-933-980, filed 3/10/92, effective 4/10/92. Statutory Authority: RCW 43.70.040. WSR 91-02-049 (Order 121), recodified as § 246-933-980, filed 12/27/90, effective 1/31/91; Order PL 262, § 308-152-020, filed 1/13/77.] Repealed by WSR 97-20-101, filed 9/29/97, effective 10/30/97. Statutory Authority: RCW 43.70.040.

PROFESSIONAL CONDUCT/ETHICS

WAC 246-933-010 Definitions. For the purposes of this chapter, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise. Unless stated, words used in the singular may be read in the plural.

(1) "Advertise" means to announce publicly by any form of media in order to aid directly or indirectly in the sale of a commodity or service.

(2) "Animal" means any species normally recognized as treatable by veterinary medicine.

(3) "Controlled substances" as defined in RCW 69.50.101.

(4) "Department" means the department of health.

(5) "Drugs" as defined in RCW 69.50.101.

(6) "Health certificate" means a document prepared pursuant to law and which attests to the fact that an animal is in a certain state of health.

(7) "Patient" means any animal under the care and treatment of a veterinarian.

(8) "Secretary" means the secretary of the department of health.

(9) "Veterinary board of governors" is that board appointed by the governor pursuant to chapter 18.92 RCW.

[Statutory Authority: RCW 18.92.030. WSR 93-08-029 (Order 353B), § 246-933-010, filed 3/30/93, effective 4/30/93; WSR 91-24-098 (Order 221B), § 246-933-010, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-010, filed 12/28/90, effective 1/31/91; Order PL 179, § 308-150-005, filed 11/27/74.]

WAC 246-933-020 Objectives. The principal objectives of the veterinary profession are to render veterinary services to society, to assist in conserving livestock resources, and to assist in relieving suffering of animals. The veterinarian shall always endeavor to act in such a manner to further these objectives.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-020, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-020, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-006, filed 7/23/80.]

WAC 246-933-030 Degree of skills. The veterinarian shall endeavor to keep abreast of new developments in veterinary medicine, surgery and dentistry, and shall endeavor to improve his or her knowledge and skill in the practice of veterinary medicine, surgery and dentistry.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-030, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-030, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-007, filed 7/23/80.]

WAC 246-933-040 Exercise of professional judgment and skills. The veterinarian shall not accept employment under terms and conditions that interfere with the free exercise of the veterinarian's professional judgment or infringe upon the utilization of his or her professional skills.

[Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-040, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-008, filed 7/23/80.]

WAC 246-933-050 Emergency care of animals of unknown ownership.

The veterinarian shall endeavor to provide at least minimal treatment to alleviate the suffering of an animal presented in the absence of the owner or the owner's agent.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-050, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-050, filed 12/28/90, effective 1/31/91; WSR 86-01-085 (Order PL 575), § 308-150-009, filed 12/18/85; WSR 80-09-106 (Order PL 351), § 308-150-009, filed 7/23/80.]

WAC 246-933-060 Patient abandonment. The veterinarian shall always be free to accept or reject a particular patient, but once care is undertaken, the veterinarian shall not neglect the patient, as long as the person presenting the patient requests and authorizes the veterinarian's services for the particular problem. Emergency treatment not authorized by the owner shall not constitute acceptance of a patient.

[Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-060, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-011, filed 7/23/80.]

WAC 246-933-070 Emergency services. (1) Emergency services shall mean the delivery of veterinary care by a licensed veterinarian during the hours when the majority of regional, daytime veterinary practices have no regularly scheduled office hours (are closed).

(2) Emergency service shall be provided at all times. This requirement does not mean that a veterinary medical facility shall be open to the public at all times but that the provision of professional services must be accomplished by appropriate means including the assignment of veterinarians or cooperation between practices or after-hours emergency veterinary medical facilities serving the area. In the absence of an emergency veterinary medical facility serving the area, the phone shall be answered at all times so that inquirers can be told if the veterinarian is available and, if not, where emergency service is available.

(3) A veterinarian who represents, in any way, that he or she provides emergency veterinary services, including but not limited to, using names or terms such as "after hours clinic," or "after hours veterinary hospital," or use of the word "emergency" in any way, shall include in all advertisements the following information:

The availability of the veterinarian who is to provide emergency services, in print at least as large as that used to advertise the availability of emergency services, as either:

(a) "Veterinarian on premises," or term of like import, which phrase shall be used when there is a veterinarian actually present at the facility who is prepared to render veterinary services and the hours such services are available; or

(b) "Veterinarian on call," or term of like import, which phrase shall be used when the veterinarian is not present at the hospital, but is able to respond within a reasonable time to requests for emergency veterinary services and has been designated to so respond.

(4) All licensees shall comply with this section by December 1, 1989.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-070, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-070, filed 12/28/90, effective 1/31/91; WSR 88-08-033 (Order PM 719), § 308-150-013, filed 4/1/88; WSR 86-01-085 (Order PL 575), § 308-150-013, filed 12/18/85.]

WAC 246-933-080 Honesty, integrity and fair dealing. A veterinarian's practice shall be conducted on the highest plane of honesty, integrity and fair dealing with clients in time and services rendered, and in the amount charged for services, facilities, appliances and drugs. It is unprofessional and unethical for a veterinarian to attempt to mislead or deceive a client or to make untruthful statements or representations to a client.

It is also unprofessional and unethical for a veterinarian to attempt to dissuade a client from filing a disciplinary complaint by, but not limited to, a liability release, waiver, or written agreement, wherein the client assumes all risk or releases the veterinarian from liability for any harm, damage, or injury to an animal while under the care, custody, or treatment by the veterinarian.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-080, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-080, filed 12/28/90, effective 1/31/91. Statutory Authority: 1988 c 206 § 604 and RCW 18.92.030. WSR 89-10-076 (Order PM 836), § 308-150-014, filed 5/3/89. Statutory Authority: RCW 18.92.030. WSR 86-01-085 (Order PL 575), § 308-150-014, filed 12/18/85.]

WAC 246-933-090 Validation of health certificate. It is unethical to sign or otherwise validate any health certificate without actually, physically inspecting the animal. A health certificate shall be dated as of the time of examination.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-090, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-090, filed 12/28/90, effective 1/31/91; Order PL 179, § 308-150-030, filed 11/27/74.]

WAC 246-933-100 Inspection of animals. It is unethical for a veterinarian when employed to inspect an animal for health and soundness, to accept a fee or other compensation in relation to the inspection from a person other than the veterinarian's employer.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-100, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-100, filed 12/28/90, effective 1/31/91; Order PL 179, § 308-150-035, filed 11/27/74.]

WAC 246-933-110 Drugs and controlled substances. It is unethical to violate any laws or regulations of either the state of Washington or the United States relating to prescription drugs or controlled substances.

[Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-110, filed 12/28/90, effective 1/31/91; Order PL 179, § 308-150-045, filed 11/27/74.]

WAC 246-933-130 Minimum sanitary conditions. It is unethical for a veterinarian to own or operate a clinic, office, hospital, mobile veterinary clinic, or other animal facility contrary to the health and sanitary standards as established by the rules and regulations as adopted by the veterinary board of governors.

[Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-130, filed 12/28/90, effective 1/31/91; Order PL 179, § 308-150-055, filed 11/27/74.]

WAC 246-933-140 Prohibited publicity and advertising. A veterinarian shall not, on behalf of himself or herself, any partner, associate or other veterinarian affiliated with his or her office or clinic, use or allow to be used any form of public communication or advertising which:

- (1) Is false, fraudulent, deceptive or misleading;
- (2) Refers to secret methods of treatment;
- (3) Is not identified as a paid advertisement or solicitation;
- (4) States or implies that a veterinarian is a certified specialist unless the veterinarian is certified in such specialty by a board recognized by the American Veterinary Medical Association.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-140, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-140, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-060, filed 7/23/80.]

WAC 246-933-150 Honoring of publicity and advertisements. (1) If a veterinarian advertises a fee for a service, the veterinarian shall render that service for no more than the fee advertised.

(2) Unless otherwise specified in the advertisement, if a veterinarian publishes any fee information, the veterinarian shall be bound by any representation made therein for the periods specified in the following categories:

(a) If in a publication which is published more frequently than one time per month, for a period of not less than thirty days after such publication.

(b) If in a publication which is published once a month or less frequently, until the publication of the succeeding issue.

(c) If in a publication which has no fixed date for publication of the succeeding issue, for a reasonable period of time after publication, but in no event less than one year.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-150, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order

108B), recodified as § 246-933-150, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-061, filed 7/23/80.]

WAC 246-933-160 Prohibited transactions. A veterinarian shall not compensate or give anything of value to representatives of the press, radio, television or other communication media in anticipation of or in return for professional publicity of any individual veterinarian in a news item.

[Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-160, filed 12/28/90, effective 1/31/91; WSR 80-09-106 (Order PL 351), § 308-150-062, filed 7/23/80.]

WAC 246-933-190 Adjudicative proceedings. The board adopts the model procedural rules for adjudicative proceedings as adopted by the department of health and contained in chapter 246-11 WAC, including subsequent amendments.

[Statutory Authority: RCW 18.92.030. WSR 93-21-007, § 246-933-190, filed 10/7/93, effective 11/7/93.]

WAC 246-933-200 Veterinary-client-patient relationship. A veterinary-client-patient relationship is the basis for interaction between veterinarians and their clients and patients.

(1) A veterinary-client-patient relationship exists when all of the following conditions have been met:

(a) The veterinarian has assumed responsibility for making clinical judgments regarding the health of the animal(s) and need for medical treatment, and the client or key party as defined in WAC 246-934-020 has agreed to follow the instructions of the veterinarian.

(b) The veterinarian has sufficient knowledge of the animal(s) to initiate, at a minimum, a general or preliminary diagnosis of the medical conditions of the animal(s). This means the veterinarian:

(i) Has examined the animal(s) within the last year, or sooner if medically appropriate; or

(ii) In cases involving operations with several animals, such as encountered at farms, laboratories, or in shelters, is personally acquainted with the keeping and care of the animal(s) by virtue of an examination of the animal(s) or by medically appropriate and timely visits to the premises where the animal(s) are kept.

(c) The veterinarian is readily available for follow-up evaluation or has arranged for emergency coverage and continuing care and treatment.

(2) The veterinarian shall not establish a veterinary-client-patient relationship solely by telephonic or other electronic means. However, once established, a veterinary-client-patient relationship may be maintained between medically necessary examinations via telephone or other types of consultations.

(3) The veterinary-client-patient relationship may be terminated under these conditions:

(a) Veterinarians may terminate a veterinary-client-patient relationship as long as the termination does not constitute patient abandonment as described in WAC 246-933-060.

(b) If there is an ongoing medical or surgical condition, the patient should be referred to another veterinarian for diagnosis, care, and treatment.

(c) Clients may terminate the veterinary-client-patient relationship at any time.

(4) For animals or animal products for food consumption:

(a) There must be a written agreement with the client that identifies the farm veterinarian of record (VOR) who is accountable for drug use and treatments administered to the animals on the farm operation;

(b) The VOR is the responsible party for providing appropriate oversight of drug use on the farm operation. Oversight includes establishment of diagnostic and treatment protocols, training of personnel, review of treatment records, monitoring drug inventories, assuring appropriate labeling of drugs, and monitoring compliance and outcomes. Veterinary oversight of drug use must include all drugs used on the farm regardless of the distribution of the drugs to the farm;

(c) Provision of drugs or drug prescriptions must be for specific time frames appropriate to the scope and type of operation involved and only for the management groups within the operation that the VOR has direct involvement and oversight;

(d) A veterinarian issuing a veterinary feed directive (VFD) must comply with applicable federal law, including 21 C.F.R. 558.6.

(5) Medical records must be maintained pursuant to WAC 246-933-320(7).

(6)(a) A veterinarian shall use or prescribe drugs only within the context of a veterinary-client-patient relationship. Veterinary prescription drugs are restricted by federal law, under 21 U.S.C. Sec. 353(f), to be used by or on the order of a licensed veterinarian.

(b) Extra label use is legal only when ordered by a veterinarian and within the context of a veterinary-client-patient relationship.

[Statutory Authority: RCW 18.92.030. WSR 16-11-004, § 246-933-200, filed 5/4/16, effective 6/4/16.]

VETERINARIAN EDUCATION AND EXAMINATION REQUIREMENTS

WAC 246-933-220 Approval of courses. A course of instruction conducted by a school, that has obtained accreditation of the course of instruction in the care and treatment of animals from the American Veterinary Medical Association, is an approved course within the meaning of section 1, chapter 44, Laws of 1974 1st ex. sess., RCW 18.92.015.

[Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-220, filed 12/28/90, effective 1/31/91; Order PL 179, § 308-151-050, filed 11/27/74.]

WAC 246-933-250 Examination and licensure requirements. To qualify for licensure in this state, a candidate must:

(1) Successfully complete either the North American Veterinary Licensing Examination (NAVLE) or the National Board Examination for Veterinary Medical Licensing (NBE);

(2) Successfully complete the Washington state jurisprudence examination; and

(3) Be a graduate of a program that is accredited by the American Veterinary Medical Association. A person who is a graduate of a college of veterinary medicine not accredited by the American Veterinary Medical Association must:

(a) Successfully complete the American Veterinary Medical Association's Educational Commission for Foreign Veterinary Graduates program (ECFVG); or

(b) Successfully complete the American Association of Veterinary State Board's Program for the Assessment of Veterinary Education Equivalence (PAVE).

[Statutory Authority: RCW 18.92.030, 18.92.280, and 2020 cc 229 and 76. WSR 22-11-062, § 246-933-250, filed 5/16/22, effective 6/16/22. Statutory Authority: RCW 18.92.030. WSR 19-23-007, § 246-933-250, filed 11/6/19, effective 12/7/19; WSR 07-20-036, § 246-933-250, filed 9/25/07, effective 10/26/07; WSR 01-02-066, § 246-933-250, filed 12/29/00, effective 1/29/01; WSR 92-17-076 (Order 299B), § 246-933-250, filed 8/19/92, effective 9/19/92; WSR 92-03-074 (Order 235B), § 246-933-250, filed 1/14/92, effective 2/14/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-250, filed 12/28/90, effective 1/31/91; WSR 88-08-033 (Order PM 719), § 308-151-080, filed 4/1/88; WSR 85-03-085 (Order PL 509), § 308-151-080, filed 1/18/85. Statutory Authority: RCW 18.92.030 and 18.92.070. WSR 83-07-050 (Order PL 429), § 308-151-080, filed 3/18/83. Statutory Authority: RCW 18.92.030. WSR 80-05-032 (Order 340), § 308-151-080, filed 4/15/80.]

WAC 246-933-255 How to obtain a temporary practice permit while the national background check is completed. Fingerprint-based national background checks may cause a delay in licensing. Individuals who satisfy all other licensing requirements and qualifications may receive a temporary practice permit while the national background check is completed.

(1) A temporary practice permit may be issued to an applicant who:

(a) Holds an unrestricted, active license to practice veterinary medicine, surgery and dentistry in another state that has substantially equivalent licensing standards to those in Washington state;

(b) Is not subject to denial of a license or issuance of a conditional or restricted license; and

(c) Does not have a criminal record in Washington state.

(2) A temporary practice permit grants the individual the full scope of practice of veterinary medicine, surgery and dentistry.

(3) A temporary practice permit will not be renewed, reissued, or extended. A temporary practice permit expires when any one of the following occurs:

(a) The license is granted;

(b) A notice of decision on application is mailed to the applicant, unless the notice of decision on the application specifically extends the duration of the temporary practice permit; or

(c) One hundred eighty days after the temporary practice permit is issued.

(4) To receive a temporary practice permit, the applicant must:

(a) Submit the necessary application, fee(s), and documentation for the license.

(b) Meet all requirements and qualifications for the license, except the results from a fingerprint-based national background check, if required.

(c) Provide verification of having an active unrestricted license to practice veterinary medicine, dentistry and surgery from another state that has substantially equivalent licensing standards as Washington state.

(d) Submit the fingerprint card and a written request for a temporary practice permit when the department notifies the applicant the national background check is required.

[Statutory Authority: RCW 18.130.064, 18.130.075, and 18.92.030. WSR 10-06-056, § 246-933-255, filed 2/24/10, effective 3/27/10.]

WAC 246-933-265 Scope of Washington state jurisprudence examination. (1) The Washington state jurisprudence examination consists of multiple choice questions relating to state laws and administrative regulations in the practice of veterinary medicine.

(2) A candidate may take the Washington state jurisprudence examination up to six months prior to graduation from an approved course of study.

(3) The passing score on the examination is ninety percent.

(4) A candidate may retake the examination by submitting an application and fee to the department of health.

[Statutory Authority: RCW 18.92.030. WSR 07-20-036, § 246-933-265, filed 9/25/07, effective 10/26/07.]

WAC 246-933-270 Examination results. The board accepts the following minimum passing score for licensure examinations.

(1) The minimum passing score for the North American Veterinary Licensing Examination (NAVLE) is the criterion-referenced passing score established by the National Board of Veterinary Medical Examiners.

(2) The minimum passing score before December 1982 for the National Board Examination for Veterinary Medical Licensing (NBE), and the Clinical Competency Test (CCT) is 1.5 standard deviation below the mean of the criterion population. From December 1992 through April 2000 the minimum passing score is the criterion referenced passing score required by the National Board of Veterinary Medical Examiners.

(3) The minimum passing score on the Washington state jurisprudence examination is ninety percent.

[Statutory Authority: RCW 18.92.030. WSR 07-20-036, § 246-933-270, filed 9/25/07, effective 10/26/07; WSR 01-02-066, § 246-933-270, filed 12/29/00, effective 1/29/01; WSR 92-17-076 (Order 299B), § 246-933-270, filed 8/19/92, effective 9/19/92; WSR 91-24-098 (Order 221B), § 246-933-270, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-270, filed 12/28/90, effective 1/31/91; WSR 85-07-021 (Order PL 523), § 308-151-100, filed 3/13/85; WSR 85-03-085 (Order PL 509), § 308-151-100, filed 1/18/85. Statutory Authority: RCW 18.92.030 and 18.92.070. WSR 83-07-050 (Order PL 429), § 308-151-100, filed 3/18/83. Statutory Authority: RCW 18.92.030. WSR 80-16-023 (Order PL 358), § 308-151-100, filed 10/29/80; WSR 80-05-032 (Order 340), § 308-151-100, filed 4/15/80.]

WAC 246-933-275 Reactivation of an expired veterinary license.

(1) To reactivate a veterinary license that has been expired for three years or less, the veterinarian must meet the requirements of chapter 246-12 WAC, Part 2.

(2) To reactivate a veterinary license that has been expired for more than three years, the practitioner must:

(a) Submit verification of unrestricted licensure in another state or jurisdiction; and

(b) Submit documentation of two hundred hours of active practice within each of the previous three years within that state or jurisdiction.

For purposes of this subsection, documentation of licensure and active practice in a foreign country is acceptable if there is an American Veterinary Medical Association accredited school or college of veterinary medicine in that country.

(3) To reactivate a veterinary license that has been expired for more than three years, when the veterinarian has not held an unrestricted license and has not been in active practice, the veterinarian must:

(a) Successfully complete the current North American Veterinary Licensing Examination as provided in WAC 246-933-250(1); and

(b) Meet the continuing education requirements of WAC 246-12-040 and chapter 246-933 WAC.

[Statutory Authority: RCW 18.92.030. WSR 14-06-067, § 246-933-275, filed 2/28/14, effective 3/31/14.]

WAC 246-933-295 Temporary practice permit—Military spouse.

A military spouse or state registered domestic partner of a military person may receive a temporary practice permit while completing any specific additional requirements that are not related to training or practice standards for the profession. The board adopts the procedural rules as adopted by the department of health in WAC 246-12-051.

[Statutory Authority: RCW 18.92.030 and 18.340.020. WSR 18-05-089, § 246-933-295, filed 2/20/18, effective 3/23/18.]

WAC 246-933-300 Veterinary specialty licensure.

(1) A person may be licensed to practice only specialized veterinary medicine in Washington state. Application for specialty licensure shall be made on forms provided by the secretary and include:

(a) Official transcript or other evidence of graduation from an American Veterinary Medical Association approved or accredited college or university; or

(b) Certification that the applicant has successfully completed either:

(i) The American Veterinary Medical Association's Educational Commission for Foreign Veterinary Graduates; or

(ii) The American Association of Veterinary State Board's Program for the Assessment of Veterinary Education Equivalence (PAVE); and

(c) Documented licensure, in good standing, to practice veterinary medicine in any state, United States territory, or province of Canada; and

(d) Certification as a diplomate of a national board or college recognized in the specialty area for which application is submitted.

(2) Applicants must pass a written examination approved by the board pertaining to laws regulating the practice of veterinary medicine in the state of Washington. Examination grades will be based on a possible score of one hundred percent with a minimum passing score of ninety percent.

(3) At the time of license renewal, licensees must present evidence of continued certification by the veterinary specialty board authority.

(4) The veterinary board of governors recognizes all veterinary medicine specialties recognized by the American Veterinary Medical Association. The practice of a veterinarian licensed as a specialized practitioner is limited to the specific specialty for which licensed.

(5) Individuals licensed as a veterinary specialist are subject to chapter 18.130 RCW.

(6) Veterinary specialty licensees shall be charged the impaired veterinarian assessment on each license issuance or renewal: Provided however, That no licensee shall pay more than one impaired veterinarian assessment per year.

[Statutory Authority: RCW 18.92.030, 18.92.135. WSR 09-09-045, § 246-933-300, filed 4/9/09, effective 5/10/09. Statutory Authority: RCW 18.92.030. WSR 92-17-076 (Order 299B), § 246-933-300, filed 8/19/92, effective 9/19/92; WSR 92-03-074 (Order 235B), § 246-933-300, filed 1/14/92, effective 2/14/92.]

WAC 246-933-305 Retired active credential. A practitioner may obtain a retired active credential. Refer to the requirements of chapter 246-12 WAC, Part 5.

[Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-933-305, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.92.030. WSR 92-03-074 (Order 235B), § 246-933-305, filed 1/14/92, effective 2/14/92.]

FACILITIES AND PRACTICE MANAGEMENT STANDARDS

WAC 246-933-310 Definitions. The definitions in this section apply in WAC 246-933-310 through 246-933-350 unless the context clearly requires otherwise.

(1) "Antiseptic surgery" means the technique used when care is taken to avoid bacterial contamination but the precautions are not as thorough and extensive as in aseptic surgery. Surgeons and surgical assistants wear clean attire and sterile gloves, and the patient is appropriately draped. A separate sterile surgical pack shall be used for each animal.

(2) "Aseptic surgery" means the technique used when everything that comes in contact with the wound is sterile and precautions are taken to ensure such sterility during the procedure. These precautions include, but are not limited to, such things as the surgery room itself, sterilization procedures, scrubbing hands and arms, sterile gloves, caps and masks, sterile long-sleeved gowns, and sterile draping and operative techniques.

(3) "Client" means the patient's owner, owner's agent, or other person presenting the patient for care.

(4) "Mobile clinic" means a vehicle, including a camper, motor home, trailer or mobile home, used as a veterinary medical facility. A mobile clinic is not required for house calls or farm calls.

(5) "Treatment" means any action or procedure taken to impact an animal's physical, mental, or behavioral health in the pursuit of preventing or resolving disease, maintaining or improving quality of life, or providing end of life care. This includes, but is not limited to, the prescription, recommendation, issuance, or administration of any drug, veterinary feed directive, vitamins, minerals, or supplements.

(6) "Veterinary medical facility" means any premise, unit, structure or vehicle where any animal is either received or confined, or both, to be examined, diagnosed or treated medically, surgically or prophylactically, as defined in RCW 18.92.010.

[Statutory Authority: RCW 18.92.030 and chapter 18.92 RCW. WSR 20-15-164, § 246-933-310, filed 7/22/20, effective 8/22/20. Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-310, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-310, filed 12/28/90, effective 1/31/91; WSR 89-02-006 (Order PM 804), § 308-153-010, filed 12/27/88. Statutory Authority: RCW 18.92.030, 18.130.050 (1) and (12) and 1986 c 259 § 139. WSR 86-13-070 (Order PM 600), § 308-153-010, filed 6/18/86; Order PL-236, § 308-153-010, filed 2/18/76.]

WAC 246-933-320 General requirements for all veterinary medical facilities. (1) **Construction and maintenance:** All facilities shall be so constructed and maintained as to provide comfort and safety for patients and clients. All areas of the premises shall be maintained in a clean and orderly condition, free of objectionable odors. All facilities shall comply with applicable state, county and municipal laws, ordinances and regulations.

(2) **Ventilation:** Adequate heating and cooling shall be provided for the comfort of the animals, and the facility shall have sufficient ventilation in all areas.

(3) **Lighting:** Proper lighting shall be provided in all rooms utilized for the practice of veterinary medicine. Outside lighting shall be adequate to identify the building and to assist the clients.

(4) **Water:** Potable water shall be provided.

(5) **Basic sanitation:** Any equipment, instruments or facilities used in the treatment of animals shall be clean and sanitary at all times to protect against the spread of diseases, parasites and infection.

(6) **Waste disposal:** Covered waste containers, impermeable by water, shall be used for the removal and disposal of animal and food wastes, bedding, animal tissues, debris and other waste.

Disposal facilities shall be so operated as to minimize insect or other vermin infestation, and to prevent odor and disease hazards or other nuisance conditions.

The facility shall use refrigeration and employ a procedure for the prompt, sanitary and esthetic disposal of dead animals which complies with all applicable state, county and municipal laws, ordinances and regulations.

(7) **Records:**

(a) Every veterinarian shall keep daily written records of the animals he or she treats.

(b) Separate records for companion animals shall be kept for each animal.

(c) The medical record for a litter may be recorded either on the dam's record or on a litter record until the individual animals are permanently placed or reach the age of three months.

(d) Records for food and fibre producing animals and animals kept in herds or flocks, etc., may be maintained on a group or owner or authorized agent basis.

(e) All records shall be legible, readily retrievable and shall be kept for a period of three years following the last treatment or examination.

(f) The author of all medical record entries must be identified by code or employee number, or initials.

(g) The records shall include, but not be limited to, the following:

(i) Name, address and telephone number of the owner or authorized agent.

(ii) Name, number or other identification of the animal or group.

(iii) Species, breed, age, sex, weight and color of the animal.

(iv) Immunization record.

(v) Beginning and ending dates of custody of the animal.

(h) The records must include sufficient information to justify the tentative diagnosis and to warrant the treatment. This would include, but not be limited to:

(i) A short history of the animal's condition as it pertains to its medical status.

(ii) Physical examination findings and any laboratory or other diagnostic tests performed or recommended.

(iii) Provisional or final diagnosis.

(iv) Treatment administered or recommended.

(v) Dosage and route of medications administered, prescribed or dispensed.

(vi) Anesthesia dosage and route of administration.

(vii) Description of surgery performed.

(viii) Progress of the case.

(8) Veterinary medical records and medical images are the property of the veterinarian or the veterinary facility that originally ordered their preparation.

(9) When requested by the owner or authorized agent, copies of records will be made available as promptly as required by medical necessity or public health circumstances, but no later than ten working days upon the owner or authorized agent's request.

(a) The veterinarian may charge the copying fee as set forth in WAC 246-08-400 as now or hereafter amended.

(b) A medical image shall be released upon the request of another veterinarian who has the authorization of the owner or authorized agent of the animal to which it pertains.

The medical image shall be returned within ten working days following receipt of a written request from the originating veterinarian or veterinary facility. If the originating veterinarian provides a copy of the medical image, he or she may charge the actual costs of duplicating the medical image.

(10) **Storage:** All supplies, including food and bedding, shall be stored in facilities which adequately protect such supplies against infestation, contamination or deterioration. Refrigeration shall be

provided for all supplies that are of a perishable nature, including foods, drugs and biologicals.

(11) **Biologicals and drugs:** Biologicals and other drugs shall be stored in such a manner as to prevent contamination and deterioration in accordance with the packaging and storage requirements of the current editions of the *U.S. Pharmacopeia*, 12601 Twinbrook Parkway, Rockville, Maryland 20852, and the *National Formulary*, Mack Publishing Company, 20th and Northampton Streets, Easton, Pennsylvania 18042 or manufacturers' recommendation.

All controlled substances shall be maintained in a locked cabinet or other suitable secure container in accordance with federal and Washington state laws.

Controlled substance records shall be readily retrievable, in accordance with federal and Washington state laws.

[Statutory Authority: RCW 18.92.030. WSR 10-11-120, § 246-933-320, filed 5/18/10, effective 6/18/10. Statutory Authority: RCW 18.92.030 and 18.92.260. WSR 03-14-035, § 246-933-320, filed 6/23/03, effective 7/24/03. Statutory Authority: RCW 18.92.030. WSR 92-17-076 (Order 299B), § 246-933-320, filed 8/19/92, effective 9/19/92; WSR 91-24-098 (Order 221B), § 246-933-320, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-320, filed 12/28/90, effective 1/31/91; WSR 88-08-033 (Order PM 719), § 308-153-020, filed 4/1/88. Statutory Authority: RCW 18.92.030, 18.130.050 (1) and (12) and 1986 c 259 § 139. WSR 86-13-070 (Order PM 600), § 308-153-020, filed 6/18/86; Order PL-236, § 308-153-020, filed 2/18/76.]

WAC 246-933-330 Minimum physical facilities. All veterinary medical facilities in which animals are received for medical, surgical or prophylactic treatment shall have the following minimum facilities, but are not limited to only these facilities:

(1) **Reception room and office:** Or a combination of the two.

(2) **Examination room:** Should be separate but may be combined with a room having a related function, such as a pharmacy or laboratory. It must be of sufficient size to accommodate the veterinarian, patient and client.

Examination tables shall have impervious surfaces. Waste receptacles shall be lined, covered or in a closed compartment, and properly maintained. A sink with clean or disposable towels must be within easy access.

(3) **Surgery:** If surgery is performed, a separate and distinct area so situated as to keep contamination and infection to a minimum; provided, however, a separate and distinct room so situated as to keep contamination and infection to a minimum shall be required.

(4) **Laboratory:** Shall be either in the facility or through consultative facilities, adequate to render diagnostic information.

(5) **Radiology:** Facilities for diagnostic radiography shall be available either on or off the premises. The facilities shall meet federal and Washington state protective requirements and be capable of producing good quality diagnostic radiographs.

(6) **Animal housing areas:** Any veterinary medical facility confining animals shall have individual cages, pens, exercise areas or stalls to confine said animals in a comfortable, sanitary and safe manner.

Cages and stalls shall be of impervious material and of adequate size to assure patient comfort and sanitation.

Runs and exercise pens shall be of a size to allow patient comfort and exercise. Runs and exercise pens shall provide and allow effective separation of adjacent animals and their waste products, and shall be constructed in such a manner as to protect against escape or injury. Floors of runs shall be of impervious material.

Animals that are hospitalized for treatment of contagious diseases shall be isolated in such a manner as to prevent the spread of contagious diseases.

[Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-330, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-330, filed 12/28/90, effective 1/31/91; WSR 89-02-006 (Order PM 804), § 308-153-030, filed 12/27/88; WSR 88-08-033 (Order PM 719), § 308-153-030, filed 4/1/88. Statutory Authority: RCW 18.92.030, 18.130.050 (1) and (12) and 1986 c 259 § 139. WSR 86-13-070 (Order PM 600), § 308-153-030, filed 6/18/86; Order PL-236, § 308-153-030, filed 2/18/76.]

WAC 246-933-340 Practice management. All veterinary medical facilities shall maintain a sanitary environment to avoid sources and transmission of infection. This includes the proper sterilization or sanitation of all equipment used in diagnosis or treatment and the proper routine disposal of waste materials.

(1) **Surgery:** Surgery shall be performed in a manner compatible with current veterinary practice with regard to anesthesia, asepsis or antisepsis, life support and monitoring procedures, and recovery care. The minimum standards for surgery shall be:

(a) Aseptic or antiseptic surgery shall be performed in a room designated and reserved for surgery and directly related noncontaminating activities.

(b) The surgery room shall be clean, orderly, well lighted and maintained in a sanitary condition, free of offensive odors.

(c) Storage in the surgery room shall be limited only to items and equipment related to surgery and surgical procedures.

(d) Instruments and equipment utilized in the surgery room shall be appropriate for the type of surgical service being provided.

(e) The operating table shall be constructed of a smooth and impervious material.

(f) Chemical disinfection ("cold sterilization") may be used only for field conditions or minor surgical procedures. Sterilizing of all appropriate equipment is required. Provisions for sterilization shall include a steam pressure sterilizer (autoclave) or a gas sterilizer (e.g., ethylene oxide).

(g) Surgical packs include towels, drapes, gloves, sponges and proper instrumentation. They shall be properly prepared for sterilization by heat or gas (sufficient to kill spores) for each sterile surgical procedure.

(h) For any major procedure, such as opening the abdominal or thoracic cavity or exposing bones or joints, a separate sterile surgical pack shall be used for each animal. Surgeons and surgical assistants shall use aseptic technique throughout the entire surgical procedure.

(i) Uncomplicated ovariohysterectomy or castration of normal healthy animals, and minor surgical procedures, such as excising small skin lesions or suturing superficial lacerations, may be performed under clean, antiseptic conditions. Surgeons and surgical assistants

shall wear clean attire and sterile gloves, and care shall be taken to avoid introducing bacterial contamination.

(j) All animals shall be properly prepared for surgery as follows:

(i) Clipping and shaving of the surgical area for major procedures requiring aseptic technique as in (h) of this subsection shall be performed in a room other than the surgery room. Loose hair shall be removed from the surgical area;

(ii) Scrubbing the surgical area with soap and water;

(iii) Disinfecting the surgical area;

(iv) Draping the surgical area if appropriate;

(k) Anesthetic equipment appropriate for the type of patient and surgery performed shall be available at all times;

(l) Compressed oxygen or other adequate means shall be available to be used for resuscitation;

(m) Emergency drugs shall be available to the surgery area;

(n) Grossly contaminated procedures, such as lancing and draining abscesses, shall not be performed in the room designated for aseptic or antiseptic surgery.

(2) **Library:** A library of appropriate veterinary journals and textbooks shall be available on the premises for ready reference.

(3) **Laboratory:** Veterinary medical facilities shall have the capability for use of either in-house or consultant laboratory service for blood chemistry, bacterial cultures and antibiotic sensitivity examinations, complete blood counts, histopathologic examinations and complete necropsies. The in-house laboratory facility shall meet the following minimum standards:

(a) The laboratory room shall be clean and orderly with provision for ample storage;

(b) Ample refrigeration shall be provided;

(c) Any tests performed shall be properly conducted by currently recognized methods to assure reasonable accuracy and reliability of results.

(4) **Radiology:** Veterinary medical facilities shall have the capability for use of either in-house or consultant services for obtaining radiographs of diagnostic quality. Radiology equipment and use shall be in compliance with federal and Washington state laws, and shall follow the guidelines approved by the American Veterinary Medical Association.

(5) **Biologicals and drugs:** The minimum standards for drug procedures shall be:

(a) All controlled substances shall be stored, maintained, administered, dispensed and prescribed in compliance with federal and Washington state laws.

(b) Among things otherwise provided by RCW 18.64.246 and 69.41.050, legend drugs dispensed by a veterinarian shall be labeled with the following:

(i) Name of client or identification of animal;

(ii) Date dispensed;

(iii) Drug expiration date;

(iv) Complete directions for use;

(v) Name and strength of the drug; and

(vi) Name of prescribing veterinarian.

(c) A record of all drugs administered or dispensed shall be kept in the client's record. In the case of companion animals this record shall be by individual animal.

(6) **Limited services:** If veterinary medical services are limited to specific aspects of practice:

(a) The public shall be informed of the limitation of services provided;

(b) All veterinary services provided in the facility shall conform to the requirements for those services listed in WAC 246-933-330 and this section;

(c) The general requirements prescribed in WAC 246-933-320 shall apply to all veterinary medical facilities.

(7) **Exceptions:**

(a) The standards and requirements prescribed in WAC 246-933-330(3) and subsection (1)(a), (c), (j)(i), (n) of this section, shall not apply to equine or food animal veterinary procedures performed in medical facilities.

(b) The standards and requirements prescribed in WAC 246-933-320 (1), (2), (3), (4), (6), (8), 246-933-330 and subsections (1)(a), (b), (c), (e), (h), (j)(i), (l), (n), (2), (3), (4), (6)(b), (c) of this section, shall not apply to equine or food animal veterinary procedures performed on the owner's premises by a veterinarian.

[Statutory Authority: RCW 18.92.030. WSR 16-24-009, § 246-933-340, filed 11/28/16, effective 12/29/16; WSR 91-24-098 (Order 221B), § 246-933-340, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-340, filed 12/28/90, effective 1/31/91; WSR 89-02-006 (Order PM 804), § 308-153-045, filed 12/27/88. Statutory Authority: RCW 18.92.030, 18.130.050 (1) and (12) and 1986 c 259 § 139. WSR 86-13-070 (Order PM 600), § 308-153-045, filed 6/18/86.]

WAC 246-933-345 Client communication regarding evaluation and treatment. (1) The veterinarian must communicate when appropriate to the client the following:

(a) Proposed diagnostic tests;

(b) Differential diagnoses;

(c) Definitive diagnoses;

(d) Proposed treatments;

(e) Common side effects or adverse outcomes from proposed diagnostic testing or treatment;

(f) Most likely side effects or adverse outcomes from proposed diagnostic testing or treatment based on patient signalment and disease status. Patient signalment may include, but is not limited to, species, breed, age, and sex;

(g) Estimated cost;

(h) Prognosis; and

(i) Alternate diagnostic and treatment options for the patient.

(2) Such communications must be timely and sufficient to enable the client to understand clearly the problem and the choices that must be made, and provide written or verbal consent for a proposed diagnostic and treatment plan. If other staff is involved in the communication process, it is the responsibility of the veterinarian to ensure that such communications are appropriate. All communications must be made prior to rendering treatment, except in cases of emergencies as described in WAC 246-933-050 or when a client cannot be reached for consultation within a reasonable time frame as dictated by the patient's condition.

(3) Client communication required in subsection (1) of this section must be documented in the patient medical record.

[Statutory Authority: RCW 18.92.030 and chapter 18.92 RCW. WSR 20-15-164, § 246-933-345, filed 7/22/20, effective 8/22/20.]

WAC 246-933-350 Release of a veterinary prescription. (1) If requested by the client, a veterinarian must provide a written prescription for any medication prescribed by that veterinarian under a valid veterinarian-client-patient relationship.

(2) As an alternative to a written prescription, if requested by the client, the veterinarian must call or send the prescription by electronic means consistent with state and federal law, to any pharmacy of the client's choosing that is licensed under chapter 18.64 RCW.

[Statutory Authority: RCW 18.92.030. WSR 16-16-071, § 246-933-350, filed 7/28/16, effective 8/28/16.]

CONTINUING EDUCATION REQUIREMENTS

WAC 246-933-401 Citation and purpose. These rules may be cited as the "veterinary continuing education rules." The purpose of these rules is to establish standards of continuing veterinary medical education. The rules provide for qualifying training methods, designating approved continuing veterinary medical education providers and setting minimum continuing veterinary medical education credit requirements.

[Statutory Authority: RCW 18.92.030. WSR 07-19-130, § 246-933-401, filed 9/19/07, effective 10/20/07; WSR 91-02-060 (Order 108B), recodified as § 246-933-401, filed 12/28/90, effective 1/31/91; Order 233, § 308-154-010, filed 2/16/77.]

WAC 246-933-420 Continuing education requirement. (1) A licensed veterinarian shall complete and document thirty hours of continuing education every two years and comply with chapter 246-12 WAC, Part 7.

(2) A licensed veterinarian shall meet the continuing education requirement by either:

(a) Completing thirty hours of education that comply with WAC 246-933-401 through 246-933-460; or

(b) Alternatively, providing proof that he or she:

(i) Became board-certified by a veterinary specialty organization recognized by the American Veterinary Medical Association (AVMA) within the continuing education reporting period; or

(ii) Has been enrolled in a residency program approved by a veterinary specialty organization recognized by the AVMA during the entire continuing education reporting period for a maximum of two reporting periods.

(3) The two-year reporting period begins January 1, 2019. A veterinarian shall complete the continuing education requirements as follows:

If continuing education is due on the veterinarian's renewal date in:	The next continuing education due date is on the veterinarian's renewal date in the year below and every two years thereafter:
2019	2021
2020	2022
2021	2023

(4) The board may audit up to twenty-five percent of veterinarians after the license is renewed and may audit a veterinarian for cause.

(a) Upon request by the board, the veterinarian is responsible for submitting documentation of completed continuing education. Documentation must include, at a minimum:

- (i) The name and credentials or qualifications of the continuing education provider;
- (ii) The date of attendance or completion;
- (iii) Course title or subject; and
- (iv) The number of hours earned.

(b) Documentation for continuing education earned pursuant to WAC 246-933-445 (2)(b) must include, in addition to (a)(i) through (iv) of this subsection, a list of attendees, and materials that sufficiently describe the content of the presentation.

(c) Failure by a veterinarian to cooperate with an audit or provide the requested proof of continuing education to the board is grounds for disciplinary action.

[Statutory Authority: RCW 18.92.030. WSR 19-02-033, § 246-933-420, filed 12/21/18, effective 1/21/19; WSR 07-19-130, § 246-933-420, filed 9/19/07, effective 10/20/07. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-933-420, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.92.030. WSR 91-24-098 (Order 221B), § 246-933-420, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-420, filed 12/28/90, effective 1/31/91; Order 233, § 308-154-020, filed 2/16/77.]

WAC 246-933-425 Approval of courses. The board will not authorize or approve specific continuing education courses or materials. All continuing education courses must be provided by organizations, institutions, or individuals in WAC 246-933-460 and contribute to the professional knowledge and development of the practitioner, enhance services provided to patients, and contribute to the practitioner's ability to deliver current standards of care. The board will accept continuing education that reasonably falls within these criteria, and relies upon the integrity of each individual practitioner, as well as that of program sponsors, in complying with this requirement and experiencing meaningful and meritorious learning. Courses cannot be exclusively for product promotion. The board reserves the right to not accept credits from any area for any practitioner if, upon auditing, it determines that a course or material did not provide appropriate information or training.

[Statutory Authority: RCW 18.92.030. WSR 19-02-033, § 246-933-425, filed 12/21/18, effective 1/21/19.]

WAC 246-933-435 Veterinarian suicide prevention education. A licensed veterinarian or a retired active licensed veterinarian shall complete a board-approved, one-time training in suicide prevention that is at least three hours in length. Training must include suicide awareness and prevention, mental health and well-being, and imminent harm by lethal means.

(1) This training must be completed by the end of the first full continuing education reporting period after July 1, 2022, or during the first full continuing education reporting period after initial licensure, whichever is later.

(2) The board accepts only courses that are listed on the board's website.

(3) Training completed between June 11, 2020, and June 30, 2022, that meets the requirements of subsection (2) of this section, is accepted as meeting the one-time training requirement of this section.

(4) The hours spent completing the training in suicide prevention under this section count toward meeting applicable continuing education requirements for veterinarian license renewal.

[Statutory Authority: RCW 18.92.030, 18.92.280, and 2020 cc 229 and 76. WSR 22-11-062, § 246-933-435, filed 5/16/22, effective 6/16/22.]

WAC 246-933-437 Veterinarians health equity continuing education training requirements. (1) Veterinarians must complete a minimum of two hours in health equity continuing education training every four years by complying with WAC 246-12-800 through 246-12-830.

(2) This training must be completed by the end of the second full continuing education reporting period after January 1, 2024, or the second full continuing education reporting period after initial licensure, whichever is later.

(3) The hours spent completing health equity continuing education under this section count toward meeting applicable continuing education requirements for veterinarian license renewal.

(4) The board may randomly audit up to 25 percent of licensed veterinarians every two years for compliance after the license is renewed as allowed by WAC 246-12-190.

[Statutory Authority: RCW 18.92.030, 18.130.040, 43.70.613, and 2021 c 276. WSR 24-02-022, § 246-933-437, filed 12/21/23, effective 1/21/24.]

WAC 246-933-440 Exceptions. The board may excuse from or grant an extension of continuing veterinary medical education requirements to a licensee due to illness or other extenuating circumstances.

Licensees seeking an extension shall petition the board, in writing, at least thirty days prior to the end of the reporting period.

[Statutory Authority: RCW 18.92.030. WSR 19-02-033, § 246-933-440, filed 12/21/18, effective 1/21/19; WSR 07-19-130, § 246-933-440, filed 9/19/07, effective 10/20/07; WSR 91-24-098 (Order 221B), § 246-933-440, filed 12/4/91, effective 1/4/92; WSR 91-02-060 (Order 108B), recodified as § 246-933-440, filed 12/28/90, effective 1/31/91; WSR 80-16-023 (Order PL 358), § 308-154-040, filed 10/29/80; Order 233, § 308-154-040, filed 2/16/77.]

WAC 246-933-445 Categories and methods of continuing education activities. (1) Categories of continuing education:

(a) Scientific or clinical. A minimum of twenty scientific or clinical credit hours must be earned in any two-year reporting period. Credits must be obtained through education offered by an approved provider listed in WAC 246-933-460.

(b) Practice management or professional development. A maximum of ten practice management or professional development credit hours may be claimed in any two-year reporting period. Credits must be obtained through education offered by an approved provider listed in WAC 246-933-460.

(2) Methods by which continuing education may be obtained:

(a) Live attended course. There is no limit for credit hours earned through live courses attended remotely, provided that attendees have the documented opportunity to question the instructor, hear the questions of other attendees, and receive responses in real time. The course must be obtained through education offered by an approved provider listed in WAC 246-933-460.

(b) Teaching. A maximum of ten teaching credit hours may be claimed in any two-year reporting period. Qualifying courses must either meet the criteria under WAC 246-933-460 or must be presented through an accredited health care learning institution. Courses must be presented to veterinarians, other credentialed health care providers, or students of health care professions. Three credit hours will be granted for each course hour taught. Credit will be granted for only the first time a course is taught.

(c) Preprogrammed materials. Preprogrammed educational materials are noninteractive and may be presented in any form of printed or electronic media. A maximum of ten credit hours may be claimed in any two-year reporting period for completion of preprogrammed educational materials. The materials must be obtained through education offered by an approved provider listed in WAC 246-933-460, and must require successful completion of an examination or assessment.

[Statutory Authority: RCW 18.92.030. WSR 19-02-033, § 246-933-445, filed 12/21/18, effective 1/21/19.]

WAC 246-933-460 Organizations, institutions or individuals approved by the veterinary board to provide continuing education courses. The board approves continuing veterinary medical education courses provided by organizations, institutions, or individuals (providers) including, but not limited to, the following:

(1) The American Association of Veterinary Laboratory Diagnosticians (AAVLD);

(2) The American Association of Veterinary State Boards (AAVSB) Registry of Approved Continuing Education (RACE)-approved courses;

(3) The American Veterinary Medical Association (AVMA);

(4) AVMA Council on Education (COE) accredited veterinary medical colleges;

(5) AVMA recognized veterinary specialty organizations;

(6) A board certified veterinarian who is certified by a veterinary specialty organization recognized by the AVMA when teaching a course within his or her area of certification;

(7) Federal, state, or local governmental agencies;

(8) An instructor with credentials or qualifications in the health, husbandry, or therapy of minor species. "Minor species" are

all animals other than humans that are not one of the major species and include, but are not limited to, animals such as zoo animals, ornamental fish, parrots, ferrets, guinea pigs, sheep, goats, catfish, game birds, and honey bees. Major species include horses, dogs, cats, cattle, pigs, turkeys, and chickens;

(9) An instructor with credentials or qualifications in practice management or professional development;

(10) Any international, national, state, provincial, regional or local veterinary medical association;

(11) The Resources for Alternative and Integrative Veterinary Education (RAIVE);

(12) A resident or intern in training for an AVMA recognized veterinary specialty organization;

(13) The United States Animal Health Association (USAHA);

(14) A veterinarian who is a faculty member of an accredited college of veterinary medicine when teaching a course within his or her area of expertise;

(15) The Washington physicians health program (WPHP).

[Statutory Authority: RCW 18.92.030. WSR 19-02-033, § 246-933-460, filed 12/21/18, effective 1/21/19; WSR 16-09-119, § 246-933-460, filed 4/20/16, effective 5/21/16; WSR 14-04-020, § 246-933-460, filed 1/27/14, effective 2/27/14; WSR 07-19-130, § 246-933-460, filed 9/19/07, effective 10/20/07; WSR 91-02-060 (Order 108B), recodified as § 246-933-460, filed 12/28/90, effective 1/31/91; Order 233, § 308-154-060, filed 2/16/77.]

AUTHORIZING ANIMAL CARE AND CONTROL AGENCIES AND NONPROFIT HUMANE SOCIETIES TO PROVIDE VETERINARY SERVICES

WAC 246-933-501 Intent. It is the intent of the legislature to allow qualified animal control agencies and humane societies to provide veterinary services to low-income households in our communities. It is not the intent of the legislature to allow these entities to provide veterinary services to the public at large, except for in emergency situations and when providing postadoption care as described in RCW 18.92.260 (1) (c).

[Statutory Authority: RCW 18.92.030, 18.92.250, 18.92.260, and 2019 c 142. WSR 23-11-002, § 246-933-501, filed 5/3/23, effective 6/3/23. Statutory Authority: RCW 18.92.030 and 18.92.260. WSR 03-14-035, § 246-933-501, filed 6/23/03, effective 7/24/03.]

WAC 246-933-510 Definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

(1) "Entity" means animal care and control agencies as defined in RCW 16.52.011 and nonprofit humane societies, which have qualified under section 501 (c) (3) of the Internal Revenue Code.

(2) "Emergency care" as referred to in RCW 18.92.260 (1) (b) means an unexpected, serious occurrence or situation which urgently requires prompt action in order to prevent an animal's death or permanent injury, unless defined otherwise by local ordinance.

(3) "Low-income household" as defined in RCW 43.185A.010 means a single person, family or unrelated persons living together whose adjusted family income is less than 80 percent of the median family income, adjusted for household size, for the county where the project is located.

[Statutory Authority: RCW 18.92.030, 18.92.250, 18.92.260, and 2019 c 142. WSR 23-11-002, § 246-933-510, filed 5/3/23, effective 6/3/23. Statutory Authority: RCW 18.92.030 and 18.92.260. WSR 03-14-035, § 246-933-510, filed 6/23/03, effective 7/24/03.]

WAC 246-933-520 Registration, household eligibility, and auditing. (1) An entity must obtain a registration credential in order to provide veterinary services as described in RCW 18.92.260. To obtain a registration the entity must comply with WAC 246-12-060.

(2) To provide veterinary services, a registered entity must adopt procedures to verify a household qualifies as a low-income household as defined in WAC 246-933-510(3). Procedures may include, but are not limited to:

(a) Reviewing proof of income;

(b) Reviewing proof of eligibility for or receipt of benefits based on low-income status; or

(c) Accepting attestation of low-income status.

(3) Upon request, entities must provide the board information demonstrating they have verified low-income status of households served.

[Statutory Authority: RCW 18.92.030, 18.92.250, 18.92.260, and 2019 c 142. WSR 23-11-002, § 246-933-520, filed 5/3/23, effective 6/3/23. Statutory Authority: RCW 18.92.030 and 18.92.260. WSR 03-14-035, § 246-933-520, filed 6/23/03, effective 7/24/03.]

WAC 246-933-530 Purchase and use of legend drugs and controlled substances. (1) For purposes of this section, "drugs" includes both legend drugs and controlled substances.

(a) "Legend drugs" means any drugs that are required by state law or regulation of the pharmacy quality assurance commission to be dispensed on prescription only or are restricted to use by practitioners only.

(b) "Controlled substances" means a drug, substance, or immediate precursor in Schedule I through V of Article II of chapter 69.50 RCW.

(2) A licensed veterinarian shall be responsible for the policies and procedures regarding the ordering, purchasing, safe storage, dispensing and administration of all drugs used at an entity registered under RCW 18.92.260 in connection with surgical sterilization or emergency care. Entities are responsible for the ordering, purchasing, and safe storage of all drugs.

(a) The veterinarian shall comply with the pharmacy quality assurance commission requirements for controlled substances in chapter 69.50 RCW, and legend drugs in chapter 69.41 RCW.

(b) All drugs shall be stored in accordance with WAC 246-933-320.

(c) All controlled substances shall be stored, maintained, administered, dispensed and prescribed in compliance with federal and Washington state laws.

(d) All legend drugs shall be dispensed in accordance with RCW 18.92.012, 18.92.013, and WAC 246-933-340(5).

(e) A record of all drugs administered or dispensed shall be kept in the individual animal's record.

(f) All records are subject to inspection by the pharmacy quality assurance commission investigators.

[Statutory Authority: RCW 18.92.030, 18.92.250, 18.92.260, and 2019 c 142. WSR 23-11-002, § 246-933-530, filed 5/3/23, effective 6/3/23. Statutory Authority: RCW 18.92.030(2). WSR 14-13-016, § 246-933-530, filed 6/6/14, effective 7/7/14. Statutory Authority: RCW 18.92.030 and 18.92.260. WSR 03-14-035, § 246-933-530, filed 6/23/03, effective 7/24/03.]

WAC 246-933-590 Humane society and animal care and control agency (entity) fees and renewal cycle. (1) Registrations must be renewed every year on August 1 as provided in chapter 246-12 WAC, Part 3.

(2) The nonrefundable fees are:

Title of Fee	Fee
Entity registration	\$120.00
Entity renewal	100.00
Late renewal penalty	80.00
Expired registration reissuance	80.00

[Statutory Authority: RCW 43.70.110, 43.70.250, and 2011 1st sp.s. c 50. WSR 11-20-092, § 246-933-590, filed 10/4/11, effective 12/1/11. Statutory Authority: RCW 43.70.250, [43.70.]280 and 43.70.110. WSR 05-12-012, § 246-933-590, filed 5/20/05, effective 7/1/05. Statutory Authority: RCW 43.70.250 and 18.92.260. WSR 03-10-044, § 246-933-590, filed 5/1/03, effective 6/1/03.]

PHYSICIAN HEALTH MONITORING

Participation in Approved Physician Health or Substance Use Disorder Monitoring Program

WAC 246-933-601 Intent. It is the intent of the legislature that the veterinary board of governors seek ways to identify and support the rehabilitation of veterinarians who have a health condition that may impair their ability to practice. The legislature intends that these veterinarians be treated so that they can return to or continue to practice veterinary medicine safely and competently. The legislature specifically intends that the veterinary board of governors establish an alternate program to the traditional administrative proceedings against such veterinarians.

In lieu of disciplinary action under RCW 18.130.160 and if the veterinary board of governors determines that the unprofessional conduct may be the result of an impairing health condition, the veterina-

ry board of governors may refer the license holder to a monitoring program.

[Statutory Authority: RCW 18.92.030, 18.92.047, 18.130.050, 18.130.175, and 18.130.186. WSR 24-02-020, § 246-933-601, filed 12/21/23, effective 1/21/24. Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-601, filed 12/28/90, effective 1/31/91. Statutory Authority: RCW 18.130.175. WSR 90-21-029 (Order 93), § 308-158-010, filed 10/9/90, effective 11/10/90.]

WAC 246-933-610 Definitions. The definitions in this section apply in WAC 246-933-601 through 246-933-630 unless the context clearly requires otherwise.

(1) "Continuing care" means ongoing treatment and other supports recommended by treatment providers following a period of intensive treatment or illness stabilization, typically at a lower level of care or service intensity.

(2) "Health professional monitoring group" means a group of veterinarians and other health professionals meeting regularly to support the health and well-being of its members. The group provides a confidential setting in which participants may safely discuss impairing or potentially impairing health conditions with a trained and experienced facilitator.

(3) "Impaired" or "impairment" means an inability to practice veterinary medicine with reasonable skill and safety due to a health condition.

(4) "Monitoring agreement" means a comprehensive, structured set of written expectations between the recovering veterinarian and the monitoring program wherein the veterinarian consents to comply with the expectations and elements of monitoring as required by the program.

(5) "Monitoring program" means a physician health program or voluntary substance use disorder monitoring program, which complies with applicable state law and is approved by the board. Such programs oversee a veterinarian's compliance with program requirements and may provide recommendations for approved evaluators or treatment providers.

(6) "Mutual support group" means a group within a 12-step or other organization approved by the monitoring program that promotes a philosophy of personal growth and change through peer support.

(7) "Random drug screens" means the collection of specified bodily fluids together with laboratory tests to detect the presence of drugs related to a substance use. Collection must occur at irregular intervals not known in advance by the veterinarian.

(8) "Substance use disorder" means continued use of substances and related behaviors that continue despite negative consequences.

(9) "Veterinarian" means an impaired or potentially impaired practitioner.

[Statutory Authority: RCW 18.92.030, 18.92.047, 18.130.050, 18.130.175, and 18.130.186. WSR 24-02-020, § 246-933-610, filed 12/21/23, effective 1/21/24. Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-610, file 12/28/90, effective 1/31/91. Statutory Authority: RCW 18.130.175. WSR 90-21-029 (Order 93), § 308-158-020, filed 10/9/90, effective 11/10/90.]

WAC 246-933-620 Approval of monitoring program. The board shall approve the monitoring program which shall participate in the rehabilitation of veterinarians. The board shall enter a contract with the monitoring program on an annual basis.

(1) A monitoring program may provide referrals for evaluations or treatment to the participating veterinarians.

(2) Monitoring program shall have staff with qualifications and knowledge commensurate with the scope of health conditions monitored by the program and the practice of veterinary medicine. At a minimum, program staff should be qualified to evaluate:

(a) Toxicology testing results;

(b) Laboratory results;

(c) The qualifications, work products, and recommendations of evaluators and treatment providers who serve program participants;

(d) Facilitator reports from health professional monitoring group;

(e) The veterinarian's work environment; and

(f) The ability of the veterinarian to practice with reasonable skill and safety.

(3) Monitoring program staff shall determine whether a veterinarian should refrain from practicing veterinary medicine for a period pending further evaluation or treatment and whether the veterinarian's access to controlled substances, or other workplace accommodations, are recommended to protect the health and well-being of the participant and their patients. Refusal to comply with recommended voluntary practice cessation, practice restrictions, or workplace accommodations will be reported to the board.

(4) A monitoring program shall:

(a) Enter an agreement with the veterinarian and the board to oversee the veterinarian's compliance with program requirements;

(b) Maintain records on participants;

(c) Provide feedback to the veterinarian if the treatment progress is acceptable;

(d) Report to the board any veterinarian who fails to comply with the requirements of the program;

(e) Provide the board with a statistical report on the program and relevant program updates, at least annually, or as requested by the board. Reports shall not include any identifying information regarding voluntary participants;

(f) Provide the board with a complete financial breakdown of cost for each veterinary participant by usage as required by the contract;

(g) Provide the board with a complete annual audited financial statement.

(5) The board shall approve and provide the monitoring program guidelines on treatment, monitoring, or limitations on the practice of veterinary medicine for participants.

[Statutory Authority: RCW 18.92.030, 18.92.047, 18.130.050, 18.130.175, and 18.130.186. WSR 24-02-020, § 246-933-620, filed 12/21/23, effective 1/21/24. Statutory Authority: RCW 18.92.030 and 18.130.050. WSR 91-24-098 (Order 221B), § 246-933-620, filed 12/4/91, effective 1/4/92. Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-620, filed 12/28/90, effective 1/31/91. Statutory Authority: RCW 18.130.175. WSR 90-21-029 (Order 93), § 308-158-030, filed 10/9/90, effective 11/10/90.]

WAC 246-933-630 Participation in approved monitoring programs.

(1) In lieu of disciplinary action, the veterinarian may accept board referral into a monitoring program.

(a) Before entering the program, the veterinarian shall undergo evaluation(s) by experts approved by the program as a condition of program participation.

(b) The veterinarian shall enter into an agreement with the program that identifies program requirements. The veterinarian shall:

(i) Remain free of all mind-altering substances, including alcohol, except for medications prescribed by an authorized prescriber, as defined in RCW 69.41.030 and 69.50.101, when specified by the monitoring program agreement.

(ii) Submit to initial and random toxicology testing when specified by the monitoring program.

(iii) Sign a waiver allowing the program to release information to the board if the veterinarian does not comply with the program or monitoring agreement.

(iv) Complete continuing care as recommended by the treatment providers.

(v) Ensure that treatment provider(s) send reports to the program at specified intervals. Reports shall include treatment adherence and progress.

(vi) Attend health professional monitoring groups and mutual support groups as recommended by the program.

(vii) Comply with practice conditions and restrictions.

(viii) Comply with other conditions in the agreement.

(ix) Except for (b)(i) through (iii) of this subsection, a program may make an exception to the foregoing requirements of individual agreements.

(c) The veterinarian is responsible for paying the costs of evaluation, treatment, toxicology testing, and monitoring program fees.

(d) The veterinarian may be subject to disciplinary action under RCW 18.130.160 and 18.130.180 if the veterinarian refuses referral to the monitoring program, does not comply with specified practice restrictions or modifications, or does not successfully complete the program.

(2) A veterinarian who is not being investigated or monitored by the board for an impairing health condition and who is not currently the subject of disciplinary action, may voluntarily participate in the monitoring program without referral by the board. Such voluntary participants shall not be subject to disciplinary action under RCW 18.130.160 and 18.130.180 for their health condition, and shall not have their participation made known to the board if they meet the requirements of the program:

(a) Before entering the program, the veterinarian shall undergo evaluation(s) by experts approved by the program as a condition of program participation.

(b) The veterinarian shall enter into an agreement with the program that identifies program requirements. The veterinarian shall:

(i) Remain free of all mind-altering substances, including alcohol, except for medications prescribed by an authorized prescriber, as defined in RCW 69.41.030 and 69.50.101, when specified by the monitoring program agreement.

(ii) Complete continuing care as recommended by the treatment providers.

(iii) Ensure the treatment provider(s) send reports to the program at specified intervals. Reports shall include treatment adherence and progress.

(iv) Submit to initial and random toxicology testing when specified by the program.

(v) Attend health professional monitoring groups and mutual support groups as recommended by the program.

(vi) Comply with practice conditions and restrictions.

(vii) Sign a waiver allowing the program to release information to the board if the veterinarian does not comply with the agreement.

(viii) Comply with other conditions in the agreement.

(ix) Except for (b)(ii) through (iii) of this subsection, a program may make an exception to the foregoing requirements of individual agreements.

(c) The veterinarian is responsible for paying the costs of evaluation, treatment, toxicology testing, and monitoring program fees.

(3) Monitoring program records shall be confidential as provided by law.

[Statutory Authority: RCW 18.92.030, 18.92.047, 18.130.050, 18.130.175, and 18.130.186. WSR 24-02-020, § 246-933-630, filed 12/21/23, effective 1/21/24. Statutory Authority: RCW 18.92.030 and 18.130.050. WSR 91-24-098 (Order 221B), § 246-933-630, filed 12/4/91, effective 1/4/92. Statutory Authority: RCW 18.92.030. WSR 91-02-060 (Order 108B), recodified as § 246-933-630, filed 12/28/90, effective 1/31/91. Statutory Authority: RCW 18.130.175. WSR 90-21-029 (Order 93), § 308-158-040, filed 10/9/90, effective 11/10/90.]

FEES

WAC 246-933-990 Veterinarian fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Initial state license	
State jurisprudence examination (initial or retake)	\$210.00
Application	145.00
UW online access surcharge (HEAL-WA)	16.00
Initial specialty license	
Application	140.00
UW online access surcharge (HEAL-WA)	16.00
Temporary permit	215.00
State or specialty license renewal	
Renewal	160.00
Impaired veterinarian assessment	25.00
UW online access surcharge (HEAL-WA)	16.00
Late renewal penalty	80.00

Title of Fee	Fee
Expired license reissuance	90.00
Retired active license and renewal	
Renewal	70.00
Impaired veterinarian assessment	25.00
UW online access surcharge (HEAL-WA)	16.00
Late renewal penalty	50.00
Duplicate license	10.00
Verification of license	25.00

[Statutory Authority: RCW 43.70.112, 43.70.250, 43.70.280, and 2019 c 140. WSR 20-08-066, § 246-933-990, filed 3/26/20, effective 7/1/20. Statutory Authority: 2016 c 42 and RCW 18.130.175, and 43.10.250. WSR 16-21-062, § 246-933-990, filed 10/14/16, effective 2/1/17. Statutory Authority: RCW 43.70.110, 43.70.250, and 2011 1st sp.s. c 50. WSR 11-20-092, § 246-933-990, filed 10/4/11, effective 12/1/11. Statutory Authority: RCW 43.70.250, [43.70.]280 and 43.70.110. WSR 05-12-012, § 246-933-990, filed 5/20/05, effective 7/1/05. Statutory Authority: RCW 43.70.250, 2001 2nd sp.s. c 7 and RCW 18.92.120. WSR 01-23-101, § 246-933-990, filed 11/21/01, effective 1/21/02. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-933-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. WSR 93-14-011, § 246-933-990, filed 6/24/93, effective 7/25/93; WSR 93-08-028 (Order 351), § 246-933-990, filed 3/30/93, effective 4/30/93; WSR 92-07-036 (Order 252), § 246-933-990, filed 3/10/92, effective 4/10/92. Statutory Authority: RCW 43.70.040. WSR 91-02-050 (Order 122), § 246-933-990, filed 12/27/90, effective 1/31/91.]